

MAR 16 1962

THE CLEVELAND MUSEUM OF ART  
FORTY-FOURTH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE  
MAY 16 to JUNE 24, 1962

PLEASE  
PRINT  
PLAINLY

Collaborator if any \_\_\_\_\_

Artist

THOMAS WILLS

Address 2154-1864 ST. S.W., AKRON, SUMMIT  
NO. STREET CITY COUNTY

Shipping Address SAME  
(IF SHIPMENT IS REQUIRED)

Tel. PLaza 34496

Please enclose Registration Fee of \$2.00 (Check or Money Order) with Entry Blank.

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**IMPORTANT**

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Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the  
Museum will have the right to dispose for its own account any entry not called for by  
July 25, 1962.

The submission of entries will be construed as acceptance of all conditions printed  
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*Thomas Wills*  
SIGNATURE